





Inventor(s): Weiner et al.

Serial No: 09/809,745

For:

Filed: March 15, 2001 CHECK BOX, if applicable:

SUPPRESSION OF VASCULAR DISORDERS BY MUCOSAL ADMINISTRATION OF HEAT SHOCK PROTEIN PEPTIDES

☐ DUPLICATE

Fee Calculation Sheet

AIMS	FOR	NUMBER FILED	NUMBER EXTRA	RATE	FEE	
	TOTAL CLAIMS (37 CFR 1.16(c))	15-20=	0x	\$ 18	= \$	0.00
かくれつ かんしゃ かんしん	INDEPENDENT CLAIMS (37 CFR 1.16(b))	6-3=	3 x	\$ 80	= \$	240.00
	MULTIPLE DEPENDENT CLAIMS (if applicable) (37 CFR 1.16(d)) + \$				= \$	
				BASIC FEE (37 CFR 1.16(a))	\$	710.00
	Fee for Petition for Extension of Time (if any)				\$	
Same of the			Total of above Ca	alculations =	\$	950.00
	Reduction by 50% for filing by small entity (Note 37 CFR 1.9, 1.27, 1.28).				\$	
Assignment Recordation Fee (if a				r Fee (if any)	\$	
A 16,000 Sec. of		Other Fees (if any				130.00
Who have				TOTAL =	\$	1,080.00

1. A check in the amount of \$1,080.00 is enclosed.

General Authorization to Charge Deposit Account and General Request for Extension of Time

- 2. a.図 If the filing of any paper in this application necessitates the payment of a fee under 37 CFR §§ 図1.16 図 1.17 or □1.18, and the fee due is in an amount different from any enclosed check or if no check is enclosed, the Commissioner is hereby authorized to charge any deficiency or credit any overpayment to Deposit Account No. 23/2825.
 - b. □ The applicant hereby revokes any prior authorization to charge a fee due under 37 CFR §§ □1.16 □ 1.17 or □ 1.18.
- 3. If the filing of any paper in this application necessitates an extension of time under 37 CFR §1.136(a), the applicant hereby requests such extension of time. If the fee due is in an amount different from any enclosed check or if no check is enclosed, the Commissioner is hereby authorized to charge any deficiency or credit any overpayment to Deposit Account No. 23/2825.

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Docket No. B0801/7202 (AWS)

Date: May 22, 2001